

10/524134

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

11183-003-999

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
U.S. NATIONAL STAGE FEES		
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500
FEE FOR EXTRA SPEC. PGS.	173 minus 100 =	73 50 =
TOTAL CHARGEABLE CLAIMS	110 minus 20 =	90
INDEPENDENT CLAIMS	28 minus 3 =	25
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	150	OR	BASIC FEE	
EXAM. FEE	200		EXAM. FEE	
SEARCH FEE	50		SEARCH FEE	
X \$ 125 =	125		X \$ 250 =	
X \$ 25 =	2250	OR	X \$ 50 =	
X \$ 100 =	2500	OR	X \$ 200 =	
+ \$ 180 =	180	OR	+ \$ 360 =	
TOTAL	5455	OR	TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

1-30-04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	112 Minus	110	= 2
Independent	28 Minus	28	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X \$ 25 =	5092	OR	X \$ 50 =	
X \$ 100 =		OR	X \$ 200 =	
+ \$ 180 =		OR	+ \$ 360 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X \$ 25 =		OR	X \$ 50 =	
X \$ 100 =		OR	X \$ 200 =	
+ \$ 180 =		OR	+ \$ 360 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application of: **Koenig *et al.***

Confirmation No.: **1503**

Serial No.: **10/524,134**

Art Unit: **1644**

Filed: **February 11, 2005**

Examiner: **Crowder, Chun**

For: **FCGAMMA RIIB SPECIFIC  
ANTIBODIES AND METHODS OF  
USE THEREOF**

Attorney Docket No: **11183-003-999**

**RESPONSE TO RESTRICTION REQUIREMENT UNDER 37 C.F.R. § 1.143**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed November 30, 2005, in which the Examiner imposed a restriction requirement, and in accordance with Rule 143 of the Rules of Practice, please enter the following amendments and consider the following remarks. Applicants submit herewith: (1) an Amendment Fee Transmittal Sheet; and (2) a Petition for Extension of Time for one month.

No other fee is believed to be due. In the event that the U.S. Patent and Trademark Office determines that any additional fees are required, please charge the required fees to Jones Day Deposit Account No. 50-3013.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 13 of this paper.

*See applied only*


**CONCLUSION**

Entry of the amendments and remarks made herein is respectfully requested.

The Examiner is invited to contact the undersigned with any questions concerning the foregoing.

Respectfully submitted,

Date: January 30, 2006

  
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